When treating of the abnormal conditions met with in the cervix uteri, he says that, "if the cervix projects into the vagina a full half inch it is very likely to be associated with the sterile state; if an inch the case is almost necessarily sterile; if it should be still more clongated, say one and a half or two inches, it becomes absolutely so; and if it does not project into the vagina at all, it is equally sterile. Here remarks from such a master are worthy of attention by every gynæcologist, yet cases have come under my own care where the latter condition obtained and the lady was a mother of several children.

Dr. Sims' remarks upon the importance of the cervix uteri being of proper size, form and density are clearly stated, and will be illustrated by cases in his practice. The elongated conoid cervix is specially dealt with as a factor in sterility.

When speaking of uterine displacements as causing sterility many important points are discussed with which every gynacologist and general practitioner would do well to refresh their memories. The way Dr. Sims illustrates his subject by cases in practice is of all possible ways of teaching the most happy and instructive—not only do we follow with eagerness the actings of his own untrammelled mind, but are taught for ourselves to thus act independently. He asks: "how am I to impress upon minds the truth of my views but by giving them the facts and circumstances that have gradually led my own convictions where I myself find them, without any prejudices or preconceived opinions on the subject?"

When discussing anteversions, the value of shortening the anterior wall of the vagina in special cases is illustrated by cases, in which the success he attained warrants further work in the same line.

Retroversions are treated in a way to discourage the abuse of pessaries, while, at the same time, value of these instruments in suitable cases and with proper precautions are insisted upon.

It is very instructive to note the frank way the author speaks of the origin of his operations for procedentia uteri, and at the same time gives his reasons for the adoption of each. Dr. Sims says: "It is always interesting to watch the slow degrees by which true principles of treatment are established. The idea of narrowing the vagina for the cure of procedentia was first suggested by Marshall Hall, but I do not know that the operation ever succeeded. Then I carried out the principle by cutting away the whole of the redundant portion of the anterior wall of the vagina. This I afterwards modified by simply denuding a large oval surface on the anterior wall and uniting its lateral edges by silver sutures. This was further modified by making a V-shaped scarification and producing a veritable fold in the wall of the vagina. Then I made the V trowel shaped, by turning its upper ends inwards across the axis of the vagina, etc. This was afterward modified by Emmet, who simply narrowed the vaginal outlet at the anterior cul de-sac, and found this to answer the purpose."

Sec. VI. begins with the statement that "the vagina must be capable of receiving and of retaining the spermatic fluid." This assertion, which of course commends itself to our judgment, is enforced by reference to conditions that operate to prevent its accomplishment.

These conditions are illustrated by cases in the author's usual happy way, which enables the reader to gain a closer apprehension of the points brought out than is possible by any other method. The story of his treatment of vaginismus and the steps that led to his method of dealing with this trouble read like a romance, only every point is full of deep interest and instruction. The author's views of treatment for non-retention of the semen in the vagina as a cause of sterility are worthy of attention, and the more so as this is too much overlooked.

Sec. VII. "For conception, semen with living spermatozoa should be deposited in the vagina at the proper time." This, though a well-known fact, is illustrated in the author's peculiarly happy and lucid way in which we see what it costs to work out facts so well-known by students in physiology of the present day.

Sec. VIII. The secretions of the cervix and vagina should not poison or kill the spermatozoa" The various kinds of secretions that prevent conception are dealt with and illustrated by cases which fix the facts in the mind. Many points are brought out that have been over-looked by most writers upon gyna cology and yet which must add very greatly to the success of the practitioner in dealing with many of these most difficult and trying cases. We commend this volume to the careful perusal of every student, and feel sure that no other extant will be more productive of fruitful results in the advancement of gynæcology.

E. H. T.

628